Rest Available Copy

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			35				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			3∫ minus 20=		· \S			X\$ 9=		OR	X\$18=	270
INDEPENDENT CLAIMS 9 minus 3 =				nus 3 =	* 6			X40=		OR	X80=	480
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	Į	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II										•	OTHER	
	a casa a more species of the	(Column 1) CLAIMS	the second second second	(Colui		(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CLAINA	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	CLAIM			+135=		OR	+270=	
							ı	TOTAL		OR	TOTAL ADDIT. FEE	
		(Calumn 1)		(Calu	ımn 2)	(Column 3)	•	ADDIT. FEE			ADDIT. FEET	
_	7 - <b>9</b>	(Column 1) CLAIMS	Constant	HIG	HEST	(Column 3)	l		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T 01 4114	=		X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	1 CLAIN		ו	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)		ADDII. 1 C.		_		Ą
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	IT CLAIN			.405		1	+270=				
	If the entry in colu	mn 1 is less than	the entry in colu	ımn 2. wri	ite "0" in α	olumn 3.		+135=		OR		<b> </b>
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												





**Application or Docket Number** 

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1. 2000

		Enecuv	e ceroper							
		CLAIMS A	S FILED - Column 1)		mn 2)	SMALL I	ENTITY	OR	OTHER SMALL	
FOR NUMBER FILED				NUMBER	EXTRA	RATE	FEE		RATE	FEE
BAS	SIC FEE						\$ <b>3</b> 55	OR		\$710
TO'	TAL CLAIMS	20= * 4		X\$ 9=		OR	X\$18=	72.00		
IND	EPENDENT CL	AIMS 5	3 = *-2		X40=		OR	X80=	160.00	
MULTIPLE DEPENDENT CLAIM PRESENT						+135 =		OR	+2 <b>7</b> 0=	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	942.00
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMALL	ENTITY	OR	OTHER SMALL	THAN
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total	* 35	Minus	# 24	= //	X\$ 9=		OR	X\$18=	198.00
AME!	Independent	* 9	Minus	*** 5	= 4	X.40=		OR	X80=	320.00
	FIRST PRESE	NTATION OF N	IULTIPLE DEI	PENDENT CLAIM	<u> </u>	+135 =		OR	+270=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	5/8.12
		(Column 1)		(Column 2)	(Column 3)					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***	=	X40=		OR	X8Q <u>-</u>	
	FIRST PRESE	ENTATION OF N	AULTIPLE DE	PENDENT CLAIM		+135=		OR	+270=	
						TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)	ADDII. FEE		•	ADDII. 1 CC	
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	<b>#</b> #	=	X\$ 9=		OR	X\$18=	
\ME	Independent	*	Minus	***	=	X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF I	MULTIPLE DE	PENDENT CLAIN	1	+135=	<del> </del>	OR	+27:0=	
	If the entry in colu	TOTAL			TOTAL	<del> </del>				
-	4f the 7-lighest No	imber Previously	Paid For IN TH	IS SPACE Is less th IS SPACE Is less th	an 3. enter "3."	ADDIT. FEE		1	ADDIT. FEE	L
	The "Highest Nur	nber Previously F	'aid For' (Total o	or independent) is th	e nignest numbe	r xound in the ap	brobuare po	K HI CC	MULLIII 1.	